P23000034777

(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: HVCE CVPKO EN	NTERPRISE INC			
	1BER: P23000034777				
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	JENIFER MORRIS				
		Name of Contact Person	n	•	
	CHAPMAN & MORRIS AC	COUNTING PA			
		Firm/ Company		•	
	150 DAL HALL BLVD				
		Address		•	
	LAKE PLACID, FL 33852				
		City/ State and Zip Cod	e	•	
	JENIFER.MORRIS@YAHO	О.СОМ			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas				
JENIFER MORRIS		at (863	465-1918		
Name	e of Contact Person	Arca Co	de & Daytime Telephone Numbe	<u>r</u> o	çûş
Enclosed is a check t	for the following amount made	payable to the Florida Dep	artment of State:	<u></u>	5193 SEP
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	72	-5 PH 나 24
An Di P.(ailing Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Ameno Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	ĹΠ	

Articles of Amendment to Articles of Incorporation of

HVC	E CVE	KO.	FNT	FRPI	RISE	INC

(Name o	f Corporation as current	ly filed with the Florida Dept. of State)	
P23000034777			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new na	me of the corporation:		
		The new	
	orp," "Inc," or "Co".	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word "	
B. Enter new principal office address, i	if applicable:	825 E. HARNEY POND RD	
(Principal office address MUST BE A STREET ADDRESS)		OKEECHOBEE, FL 34974	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		825 E. HARNEY POND RD	
		OKEECHOBEE, FL 34974	
D. If amending the registered agent an new registered agent and/or the new		dress in Florida, enter the name of the s:	
Name of New Registered Agent	SYDNEY R. GORE	S: 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
	825 E. HARNEY POND	RD	
	(Florida s	reet address)	
New Registered Office Address:	ОКЕЕСНОВЕЕ	Florida 34974 ===================================	
		(City) (Zip Code)	
		<u>ri</u> ; +	
New Registered Agent's Signature, if cl I hereby accept the appointment as registe		t: with and accept the obligations of the position.	
Sydne	y Hore Signature of New .	Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	\underline{PT}	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	VP,S	WILLEMA B. DAVIS	297 E INTERLAKE BLVD
Add X Remove			LAKE PLACID, FL 33852
2) Change		-	
Add Remove 3) Change Add		-	
Remove 4)ChangeAdd			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
	51.57 51.57 51.57 51.57 51.57 51.57
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	4
provisions for implementing the amendment if not contained in the amendment itself:	- 11' - 5- - 12' - 5-
(if not applicable, indicate N/A)	
	- , (
	一芸
	m

The date of each amendment(s late this document was signed.) adoption:	, if other than the
Effective date if applicable:	8/38/3033	
	(no more than 90 days after amendment file dat	te)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requireme Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without share	cholder action and shareholder
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the a sufficient for approval.	mendment(s)
	approved by the shareholders through voting groups. The follow for each voting group entitled to vote separately on the amendm	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
	812812023	
Dated	<u> </u>	
Signature <u></u>	indicate the se	
(By sele	director president or other officer – if directors or officers have eted, by an incorporator – if in the hands of a receiver, trustee, of binted fiduciary by that fiduciary)	
	SYDNEY R. GORE	305
	(Typed or printed name of person signing)	9021 SEP
	PRESIDENT	
	(Title of person signing)	
		PH 4: 24 5:AT 6: FI
		JE +